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Application Number

First Named Inventor

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Group Art Unit

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	U.S. PATENT DOCUMENTS								
Examiner Cite Initials' No.1		U.S. Patent Document Kind Code ²		Name of Patentee or Applicant	Date of Publication of Cited Document	Peges, Columns, Lines, Where Relevant			
	Number	(if known)	of Cited Document	MM-DD-YYYY	Passages or Relevant Figures Appear				
PHI		6,439,513		Pascoe	8/27/2002				
والمرا		5,772,326		Post	3/3/1998				
V		6,250,230		Post	6/26/2001				
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